

Application for Special Event Permit
Town of Clarence, New York

Garage Sale _____
Tent Sale _____
Outdoor Sale _____
Special Event _____

Received by _____

Date : _____

Name and Address of Applicant :

Sketch : (attach any site plans if applicable)

Phone : _____

Location of Event :

Dates of the Special Event :

Description of Special Event :

Conditions :

Town Use Only :

Site Plan _____
Traffic flow _____

Fire Lane _____
Lighting _____

Visibility _____
Setbacks _____

Final Action _____
Action Signature Date

Permit No. _____